## PART B - FEE(S) TRANSMITTAL 02-14-05

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Express Mail ED 026954659US

(703) 746-4000 or <u>Fax</u> INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| appropriate. All further correspondence including the Pat indicated unless corrected below or directed otherwise in maintenance fee notifications.  | ent, advance orders and noti<br>Block 1, by (a) specifying a                        | fication of maintenance fees of new correspondence address  | will be mailed to the current; and/or (b) indicating a sepa  | correspondence address as arate "FEE ADDRESS" for                                     |  |
|---|---|---|--|---|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any 30698 7590 11/17/2004   | change of address)  | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |  |   |  |
| NASA/MARSHALL SPACE FLIGHT<br>LSO1/OFFICE OF CHIEF COUNSEL<br>MSFC, AL 35812  | FBS 1 1 2005  | I hereby certify that ti<br>States Postal Service<br>addressed to the Ma  | rtificate of Mailing or Transis Fee(s) Transmittal is bein with sufficient postage for the last of the | g deposited with the United of the lass mail in an envelope above, or being facsimile |  |
| 03/14/2005 LWONDIM2 00000113 140116 0987780:  | 2   | Lisa R. Hug   | ghes   | (Depositor's name)  |  |
| 01 FC 1501 1400.00 DA<br>02 FC:1504 300.00 DA<br>03 FC:8001 21,80 DA  | Marie   | 3 2/11/05   | Hughes   | (Signature)   |  |
| APPLICATION NO.   FILING DATE   | FIRST NAMEI   | DINVENTOR   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.  |  |
| 09/877,801 / 06/06/2001   | Andrew  | S. Keys   | MFS-31565-1  | 1358  |  |
| TITLE OF INVENTION: PHASE MODULATOR WITH 7 Void date: 03/14/2005 LWONDIM2 03/14/2005 LWONDIM2 000001/3 140116 098778010 FC:1501 1400.00/CR  |   |   |  |   |  |
| 02 FC-4504<br>03 FC-8004N. TYPE 21.00 CRMALL ENTITY   | ISSUE FEE   | PUBLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE  |  |
| / nonprovisional / NO   | \$1370  | \$300 03/14/20  | \$1670<br>05 LWONDIM2 00000114 1/  | 02/17/2005  |  |
| / EXAMINER  | ART UNIT  | CLASS-SUBCLIADS [: 15   | 1400.00 DA   | 40116 09877801  |  |
| MOONEY, MICHAEL P   | 2883  | 385-0020003 FC:15   | V4 200 AA NA   |   |  |
| CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  |   | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.           |  |   |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PLEASE NOTE: Unless an assignee is identified belo recordation as set forth in 37 CFR 3.11. Completion of   | w, no assignee data will app<br>this form is NOT a substitute                       | ear on the patent. If an assign for filing an assignment.   | ·  | - m   |  |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) (D) 20546   |   |   |  |   |  |
| by the Administrator of the Nat   |   | s   |  | •   |  |
| and Space Administration Please check the appropriate assignee category or categorie  | s (will not be printed on the p   | atent): 🔲 Individual 🚨 C  | orporation or other private gr   | oup entity Government   |  |
| 4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  |   |   |  |   |  |
|   |   | in the amount of the fee(s) is en   |  |   |  |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies  | The Dire  | ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-0116 (enclose an extra copy of this form).  |  |   |  |
| 5. Change in Entity Status (from status indicated above)  | Deposit Neo   | 14=U110-  | (enclose an exta e   | · · · · · · · · · · · · · · · · · · ·   |  |
| a. Applicant claims SMALL ENTITY status. See 37   | CFR 1.27.   | ant is no longer claiming SMA   | LL ENTITY status. See 37 C   | CFR 1.27(g)(2).   |  |
| The Director of the USPTO is requested to apply the Issue NOTE: The Issue Fee and Publication Fee (if required) wil interest as shown by the records of the United States Patent  | Fee and Publication Fee (if and I not be accepted from anyone and Trademark Office. | y) or to re-apply any previous<br>to other than the applicant; a reg  | ly paid issue fee to the applic<br>istered attorney or agent; or t   | ation identified above.<br>he assignee or other party in                              |  |
| Authorized Signature  | Deran   | Date  | 2/11/05  |   |  |
| Typed or printed name Jerry L. Seemann  |   | Registration  | No. 33,454   | · •   |  |
| This collection of information is required by 37 CFR 1.311 an application. Confidentiality is governed by 35 U.S.C. 1 submitting the completed application form to the USPTO. this form and/or suggestions for reducing this burden, shot Box 1450, Alexandria, Virginia 22313-1450. DO NOT SE Alexandria, Virginia 22313-1450. | 22 and 37 CFR 1.14. This col<br>Time will vary depending up                         | lection is estimated to take 12 on the individual case. Any c   | minutes to complete, includi-<br>omments on the amount of ti   | ng gathering, preparing, and ime you require to complete                              |  |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.